Case:12-42364-LWD Doc#:1 Filed:12/04/12 Entered:12/04/12 14:52:48 Page:1 of 52

	ruptcy Co				ary Petition			
Name of Debtor (if individual, enter Last, First, Jones, Drevon M	Middle):			of Joint De	_) (Last, First,	Middle):	
All Other Names used by the Debtor in the last (include married, maiden, and trade names):	8 years		(includ	le married,	maiden, and	trade names):	n the last 8 year : na Archibald	
Last four digits of Soc. Sec. or Individual-Taxpa (if more than one, state all) xxx-xx-2907 Street Address of Debtor (No. and Street, City, a		Complete EIN	(if more	than one, state x-xx-4714	all) -		Caxpayer I.D. (IT	TIN) No./Complete EIN
4214 Rayburn St Savannah, GA		ZIP Code	421	4 Raybu annah, 0	rn St	(No. and Sue	eet, City, and St	ZIP Code
County of Residence or of the Principal Place o		31405			nce or of the	Principal Pla	ce of Business:	31405
Chatham Mailing Address of Debtor (if different from stro	eet address):			g Address	of Joint Debto	or (if differen	t from street add	dress):
	_	ZIP Code						ZIP Code
Location of Principal Assets of Business Debtor (if different from street address above):			1					
Type of Debtor (Form of Organization) (Check one box)		of Business one box)			•	_	tcy Code Under	
Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. Corporation (includes LLC and LLP) Partnership Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Health Care Bus Single Asset Re in 11 U.S.C. § 1 Railroad Stockbroker Commodity Bro	siness al Estate as det 01 (51B)	fined	Chapte Chapte Chapte Chapte Chapte	er 7 er 9 er 11 er 12	☐ Ch of a ☐ Ch	apter 15 Petition a Foreign Main	n for Recognition Proceeding n for Recognition
Chapter 15 Debtors	Other	mpt Entity					of Debts	
Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending:		, if applicable) empt organizatio the United States		defined		nsumer debts,	for	Debts are primarily business debts.
Filing Fee (Check one box	κ)	Check one		noll business	-	ter 11 Debto		
□ Full Filing Fee attached □ Filing Fee to be paid in installments (applicable to attach signed application for the court's considerat debtor is unable to pay fee except in installments. Form 3A. □ Filing Fee waiver requested (applicable to chapter attach signed application for the court's considerat	ion certifying that the Rule 1006(b). See Offici 7 individuals only). Mus	Check all a st B. A pla A pla A coe	or is not or's aggr ess than \$ pplicable an is bein eptances of	egate noncor 52,343,300 (as boxes: g filed with of the plan w	ness debtor as dentingent liquida amount subject this petition.	lefined in 11 U atted debts (excl to adjustment of	S.C. § 101(51D). luding debts owed	to insiders or affiliates) very three years thereafter).
Statistical/Administrative Information ☐ Debtor estimates that funds will be available ☐ Debtor estimates that, after any exempt prop there will be no funds available for distributions.	erty is excluded and a	administrative		s paid,		THIS	SPACE IS FOR C	OURT USE ONLY
Estimated Number of Creditors	1,000- 5,001- 5,000 10,000	10,001- 25	,001- ,000	50,001- 100,000	OVER 100,000			
\$0 to \$50,001 to \$100,001 to \$500,001 \$50,000 \$100,000 \$500,000 to \$1	\$1,000,001 \$10,000,001 to \$10 to \$50 million million	to \$100 to 5	00,000,001 \$500 llion	\$500,000,001 to \$1 billion				
\$0 to \$50,001 to \$100,001 to \$500,001 \$50,000 \$100,000 \$500,000 to \$1	\$1,000,001 \$10,000,001 to \$10 to \$50 million million	to \$100 to \$	00,000,001 \$500 lion	\$500,000,001 to \$1 billion	More than \$1 billion			

Case:12-42364-LWD Doc#:1 Filed:12/04/12 Entered:12/04/12 14:52:48 Page:2 o

of 52 Page 2	
sheet)	
nsumer debts.) declare that I chapter 7, 11, relief available lebtor the notice	
<u>4, 2012</u>	
safety?	
)	
s in	

Voluntary	y Petition	Name of Debtor(s): Jones, Drevon M	Tuge 2		
(This page mu	st be completed and filed in every case)	Jones, Shalena C			
	All Prior Bankruptcy Cases Filed Within Last	8 Years (If more than two, attach ad	ditional sheet)		
Location Where Filed:	- None -	Case Number:	Date Filed:		
Location Where Filed:		Case Number:	Date Filed:		
Per	nding Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If more than	one, attach additional sheet)		
Name of Debte - None -	DIT:	Case Number:	Date Filed:		
District:		Relationship:	Judge:		
	Exhibit A		hibit B		
(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.) (To be completed if debtor is an individual whose debts are primarily consumer definition. It, the attorney for the petitioner named in the foregoing petition, declare have informed the petitioner that [he or she] may proceed under chapter 12, or 13 of title 11, United States Code, and have explained the relief available and is requesting relief under chapter 11.)					
☐ Exhibit .	A is attached and made a part of this petition.	X /s/ John E. Pytte	December 4, 2012		
Signature of Attorney for Debtor(s) (Date) John E. Pytte 590555					
	Exh	ibit C			
	r own or have possession of any property that poses or is alleged to Exhibit C is attached and made a part of this petition.	pose a threat of imminent and identifiable	harm to public health or safety?		
	Exh	ibit D			
_	eted by every individual debtor. If a joint petition is filed, ear D completed and signed by the debtor is attached and made a nt petition:	•	separate Exhibit D.)		
■ Exhibit	D also completed and signed by the joint debtor is attached a	and made a part of this petition.			
	Information Regardin	_			
•	(Check any ap Debtor has been domiciled or has had a residence, principa days immediately preceding the date of this petition or for	al place of business, or principal asset			
		• .	·		
	Certification by a Debtor Who Reside (Check all appl		ty		
	Landlord has a judgment against the debtor for possession		complete the following.)		
	(Name of landlord that obtained judgment)				
	(Address of landlord)				
	Debtor claims that under applicable nonbankruptcy law, the entire monetary default that gave rise to the judgment f				
	Debtor has included in this petition the deposit with the co after the filing of the petition.	urt of any rent that would become due	e during the 30-day period		
	Debtor certifies that he/she has served the Landlord with the	nis certification. (11 U.S.C. § 362(l)).			

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Jones, Drevon M Jones, Shalena C

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

Iff petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition

is true and correct, that I am the foreign representative of a debtor in a foreign

proceeding, and that I am authorized to file this petition.

□ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X /s/ Drevon M Jones

Signature of Debtor Drevon M Jones

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

X /s/ Shalena C Jones

Signature of Joint Debtor Shalena C Jones

Telephone Number (If not represented by attorney)

December 4, 2012

Date

Signature of Attorney*

X /s/ John E. Pytte

Signature of Attorney for Debtor(s)

John E. Pytte 590555

Printed Name of Attorney for Debtor(s)

John Pytte

Firm Name

P.O. BOX 949 Hinesville, GA 31310

Address

Email: johnpytte@jpytte.com

912-369-3569 Fax: 912-367-3579

Telephone Number

December 4, 2012

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

T7

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address		

Date

X_

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

B8 (Form 8) (12/08)

United States Bankruptcy Court Southern District of Georgia

In re	Drevon M Jones Shalena C Jones			Case No.	
			Debtor(s)	Chapter	7
PART	A - Debts secured by propert		nust be fully c		
	property of the estate. Attac	en additional pages if ne	cessary.)		
Proper	ty No. 1				7
	tor's Name: nancial			perty Securing Debt rande Cherokee	:
Proper	ty will be (check one):				
	Surrendered	■ Retained			
	ning the property, I intend to (ch Redeem the property	eck at least one):			
	Reaffirm the debt	(for example, ex-	aid lian vaina 1	1 II C C 8 522(f))	
	Other. Explain	(for example, ave	old hen using 1.	1 U.S.C. § 522(f)).	
	ty is (check one):		=		
	Claimed as Exempt		☐ Not claime	d as exempt	
Proper	ty No. 2				
	tor's Name: nd Mtg/Midfirst			perty Securing Debt Green Dr, Fairburn,	
			Surrendering	J	
Proper	ty will be (check one):				
•	Surrendered	☐ Retained			
	ning the property, I intend to (ch Redeem the property Reaffirm the debt Other. Explain		oid lien using 1	1 U.S.C. § 522(f)).	
Proper	ty is (check one):				
_	Claimed as Exempt		■ Not claime	d as exempt	
	B - Personal property subject to additional pages if necessary.)	unexpired leases. (All three	e columns of Pa	rt B must be complete	ed for each unexpired lease.
Proper	ty No. 1				
Lessor	:'s Name: E-	Describe Leased Pro	operty:	Lease will be U.S.C. § 365	Assumed pursuant to 11 (p)(2):

B8 (Form 8) (12/08) Page 2

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date	December 4, 2012	Signature	/s/ Drevon M Jones	
			Drevon M Jones	
			Debtor	
Date	December 4, 2012	Signature	/s/ Shalena C Jones	
			Shalena C Jones	
			Joint Debtor	

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Southern District of Georgia

In re	Drevon M Jones Shalena C Jones		Case No.	
		Debtor(s)	Chapter	7

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

B 1D (Official Form 1, Exhibit D) (12/09) - Cont.	Page 2
statement.] [Must be accompanied by a motion for d □ Incapacity. (Defined in 11 U.S.C. § mental deficiency so as to be incapable of rea financial responsibilities.); □ Disability. (Defined in 11 U.S.C. §	nseling briefing because of: [Check the applicable letermination by the court.] 109(h)(4) as impaired by reason of mental illness or alizing and making rational decisions with respect to 109(h)(4) as physically impaired to the extent of being in a credit counseling briefing in person, by telephone, or
through the Internet.); Active military duty in a military co	ombat zone.
☐ 5. The United States trustee or bankruptcy requirement of 11 U.S.C. § 109(h) does not apply in	administrator has determined that the credit counseling this district.
I certify under penalty of perjury that the	information provided above is true and correct.
Signature of Debtor:	/s/ Drevon M Jones
_	Drevon M Jones

Date: December 4, 2012

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Southern District of Georgia

In re	Drevon M Jones Shalena C Jones		Case No.	
		Debtor(s)	Chapter	7

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

B 1D (Official Form 1, Exhibit D) (12/09) - Cont.	Page 2
☐ 4. I am not required to receive a credit cou	nseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for a	
☐ Incapacity. (Defined in 11 U.S.C. §	§ 109(h)(4) as impaired by reason of mental illness or
* · ·	alizing and making rational decisions with respect to
financial responsibilities.);	
1	109(h)(4) as physically impaired to the extent of being
• `	in a credit counseling briefing in person, by telephone, or
through the Internet.);	
☐ Active military duty in a military c	ombat zone.
☐ 5. The United States trustee or bankruptcy requirement of 11 U.S.C. § 109(h) does not apply in	administrator has determined that the credit counseling this district.
I certify under penalty of perjury that the	information provided above is true and correct.
Signature of Debtor:	/s/ Shalena C Jones
Ç	Shalena C Jones
Date: December 4, 2	012

Date:

B6 Summary (Official Form 6 - Summary) (12/07)

United States Bankruptcy Court Southern District of Georgia

In re	Drevon M Jones,		Case No.	
	Shalena C Jones			
-		, Debtors	Chapter	7
			•	

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	156,126.00		
B - Personal Property	Yes	4	49,425.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		192,108.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	6		125,349.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			5,693.91
J - Current Expenditures of Individual Debtor(s)	Yes	2			5,672.00
Total Number of Sheets of ALL Schedu	ıles	19			
	T	otal Assets	205,551.00		
		1	Total Liabilities	317,457.00	

United States Bankruptcy Court Southern District of Georgia

In re	Drevon M Jones,		Case No.	
	Shalena C Jones			
_		, Debtors	Chapter	7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. \S 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

State the following:

Average Income (from Schedule I, Line 16)	5,693.91
Average Expenses (from Schedule J, Line 18)	5,672.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	7,264.82

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		982.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		125,349.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		126,331.00

Case:12-42364-LWD Doc#:1 Filed:12/04/12 Entered:12/04/12 14:52:48 Page:12 of 52

B6A (Official Form 6A) (12/07)

In re	Drevon M Jones,	Case No.
	Shalena Culones	

Debtors

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property Nature of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption Amount of Secured Claim	6000 Autumn Green Dr. Fairburn, GA 30213	J	156,126.00	156,126.00
	Description and Location of Property	Wife, Joint, or	Debtor's Interest in Property, without Deducting any Secured	

Surrendering

Sub-Total > 156,126.00 (Total of this page)

Total > 156,126.00

B6B (Official Form 6B) (12/07)

In re	Drevon M Jones,	Case No.
	Shalena C Jones	

Debtors

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O N Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	x		
2.	Checking, savings or other financial	USAA Checking/Savings	J	25.00
	accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and	Bank of America /CheckingSavings	J	1,000.00
	homestead associations, or credit unions, brokerage houses, or cooperatives.	ING Savings	J	7,000.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	x		
4.	Household goods and furnishings, including audio, video, and computer equipment.	HHGS, Appliances and Electronics	J	1,500.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	x		
6.	Wearing apparel.	Clothing	J	300.00
7.	Furs and jewelry.	Wedding Bands and Engagement Ring	J	200.00
8.	Firearms and sports, photographic, and other hobby equipment.	x		
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X		
10.	Annuities. Itemize and name each issuer.	x		

Sub-Total > 10,025.00 (Total of this page)

³ continuation sheets attached to the Schedule of Personal Property

 $B6B\ (Official\ Form\ 6B)\ (12/07)$ - Cont.

In re	Drevon M Jones,
	Shalena C Jones

Case No.

Debtors

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

			(Continuation Sheet)		
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	x			
				Sub-Tota	al > 0.00
			(To	otal of this page)	

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

 $B6B\ (Official\ Form\ 6B)\ (12/07)$ - Cont.

In re	Drevon M Jones,
	Shalena C Jones

Case No.

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	x			
25.	Automobiles, trucks, trailers, and	2012	2 Jeep Grande Cherokee	н	35,000.00
	other vehicles and accessories.	2004	Ford F150	н	2,700.00
		High	Mileage over 200,000		
		2002	Podge Intrepid	J	1,700.00
		High	Mileage		
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			

Sub-Total > 39,400.00 (Total of this page)

Sheet <u>2</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

Case:12-42364-LWD Doc#:1 Filed:12/04/12 Entered:12/04/12 14:52:48 Page:16 of 52

 $B6B\ (Official\ Form\ 6B)\ (12/07)$ - Cont.

In	re Drevon M Jones, Shalena C Jones		Ca	ise No	
	-		Debtors		
		SCHEDUI	LE B - PERSONAL PROPERT (Continuation Sheet)	Y	
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
35.	Other personal property of any kind	Х			

35. Other personal property of any kind not already listed. Itemize.

| Sub-Total > 0.00 (Total of this page) | Total > 49,425.00 B6C (Official Form 6C) (4/10)

In re	Drevon M Jones,	Case No.
	Shalena C Jones	

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

11 U.S.C. §522(b)(2)

11 U.S.C. §522(b)(3)

Check if debtor claims a homestead exemption that exceeds \$146,450. (Amount subject to adjustment on 4/1/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Checking, Savings, or Other Financial Accounts, (USAA Checking/Savings	Certificates of Deposit O.C.G.A. § 44-13-100(a)(6)	25.00	25.00
Bank of America /CheckingSavings	O.C.G.A. § 44-13-100(a)(6)	1,000.00	1,000.00
ING Savings	O.C.G.A. § 44-13-100(a)(6)	7,000.00	7,000.00
Household Goods and Furnishings HHGS, Appliances and Electronics	O.C.G.A. § 44-13-100(a)(4)	1,500.00	1,500.00
Wearing Apparel Clothing	O.C.G.A. § 44-13-100(a)(4)	300.00	300.00
<u>Furs and Jewelry</u> Wedding Bands and Engagement Ring	O.C.G.A. § 44-13-100(a)(5)	200.00	200.00
Automobiles, Trucks, Trailers, and Other Vehicles 2004 Ford F150	O.C.G.A. § 44-13-100(a)(3)	2,700.00	2,700.00
High Mileage over 200,000			
2002 Dodge Intrepid	O.C.G.A. § 44-13-100(a)(3)	1,700.00	1,700.00
High Mileage			

Total: 14,425.00 14,425.00

B6D (Official Form 6D) (12/07)

In re	Drevon M Jones,	Case No.
	Shalena C Jones	

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBLOR	Hu H K J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	N T I N G E	1 Q D L D	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxxxxxxx4923			Opened 1/16/12 Last Active 11/01/12	T	A T E D			
Ally Financial 200 Renaissance Ctr Detroit, MI 48243		Н	2012 Jeep Grande Cherokee		D			
			Value \$ 35,000.00	Ш			35,982.00	982.00
Account No. xxxx9263			Opened 1/23/04 Last Active 9/01/12					
Midland Mtg/Midfirst 999 Nw Grand Blvd Oklahoma City, OK 73118		w	6000 Autumn Green Dr, Fairburn, GA 30213 Surrendering					
			Value \$ 156,126.00	11			156,126.00	0.00
Account No.			Value \$	-				
Account No.				П				
			Value \$	-				
continuation sheets attached			S (Total of the	Subto			192,108.00	982.00
			(Report on Summary of Sc		otal iles		192,108.00	982.00

B6E (Official Form 6E) (4/10)

In re	Drevon M Jones,	Case No.
	Shalena C Jones	

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts \underline{not} entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

= check and confidence in the second assumed and confidence provides and confidence and confiden
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
Domestic support obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$11,725* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busines whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,775* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals Claims of individuals up to \$2,600* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
☐ Taxes and certain other debts owed to governmental units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
Commitments to maintain the capital of an insured depository institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

0 continuation sheets attached

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Case:12-42364-LWD Doc#:1 Filed:12/04/12 Entered:12/04/12 14:52:48 Page:20 of 52

B6F (Official Form 6F) (12/07)

In re	Drevon M Jones, Shalena C Jones		Case No.	
_		Debtors	_,	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDAT		A	AMOUNT OF CLAIM
Account No. xxxxxxxxxx0001	1		Opened 8/01/95 Last Active 2/01/03	Т	E			
Aes/Pheaa 1200 North 7th Street Harrisburg, PA 17102		W	InstallmentSalesContract		D		-	0.00
Account No. xxxxxxxxxx0002	T		Opened 11/06/96 Last Active 2/01/03	T	T	T	1	
Aes/Wachovia Education Po Box 2461 Harrisburg, PA 17105		W	Educational					
								0.00
Account No. xxxxxx1831 Affiliated Po Box 790001 Sunrise Beach, MO 65079		W	Opened 9/13/04 Last Active 7/09/05 InstallmentSalesContract					
	_	-	0 10/04/04 1 14 17 14/04/04	\downarrow	<u> </u>	Ļ	\bot	0.00
Account No. xxx8598 Bank Of Texas Na 5956 Sherry Ln Dallas, TX 75225		н	Opened 6/24/04 Last Active 1/24/11 VeteransAdministrationRealEstateMortgage					0.00
5 continuation sheets attached	_			Subt	tota	ıl	\dagger	0.00
continuation sheets attached			(Total of t	his	pag	ze)	, [0.00

Case:12-42364-LWD Doc#:1 Filed:12/04/12 Entered:12/04/12 14:52:48 Page:21 of 52

B6F (Official Form 6F) (12/07) - Co	ont.		

In re	Drevon M Jones,	Case No.
_	Shalena C Jones	

Debtors SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME,	ç	Hu	sband, Wife, Joint, or Community	C	Ü	Þ	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J M H	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	NLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. xxxxxx0405			Opened 10/01/04 Last Active 4/16/05	T	E		
Benfcl/Hfc Po Box 3425 Buffalo, NY 14240		н	InstallmentSalesContract		D		0.00
Account No. xxxxxxxxxxxx7907			Opened 7/06/06 Last Active 10/22/12				
Bk Of Amer De5-019-03-07 Newark, DE 19714		н	CreditCard				1,532.00
Account No. xxxxxxxxx1524	┢	┢	Opened 2/24/04 Last Active 7/08/08	+	╁		
Cadence Bank Na 301 E Main St Starkville, MS 39759		w	Secured				0.00
Account No. Multiple accounts	┢	H	CreditCard	T	T		
Cap One Po Box 5253 Carol Stream, IL 60197		J					3,568.00
Account No. xxx5610			Opened 10/19/02 Last Active 3/05/04	\dagger		\vdash	
Carmax Auto Finance 2040 Thalbro St Richmond, VA 23230		w	Automobile				0.00
Sheet no1 of _5 sheets attached to Schedule of				Sub			5,100.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	3,100.00

Case:12-42364-LWD Doc#:1 Filed:12/04/12 Entered:12/04/12 14:52:48 Page:22 of 52

 $B6F\ (Official\ Form\ 6F)\ (12/07)$ - Cont.

In re	Drevon M Jones,	Case No.
_	Shalena C Jones	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME,	C	Ηι	ssband, Wife, Joint, or Community	C	U	ΠО	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J M H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT		SPUT	AMOUNT OF CLAIM
Account No. xxxxxxxxxxx1951			Opened 10/01/98 Last Active 5/26/05	Т	T E		
Cb/Express Po Box 330066 Northglenn, CO 80233-8066		w	ChargeAccount		D		0.00
Account No. xxxx2195	T		Opened 6/24/04 Last Active 3/04/10				
Charter Bank 2130 Eubank Blvd Ne Albuquerque, NM 87112		н	VeteransAdministrationRealEstateMortgage				0.00
Account No. Multiple accounts	┢	┢		\vdash	┢	Н	
Citi Po Box 6241 Sioux Falls, SD 57117		J					10,114.00
Account No. xxxxxx2688	T		Opened 1/23/04 Last Active 11/02/11		T		
Citimortgage Inc Po Box 9438 Gaithersburg, MD 20898		w	FHARealEstateMortgage				0.00
Account No. xxxxxx6163	t	\vdash	Opened 6/11/12 Last Active 9/01/12	+	\vdash	H	
Credit Protection Asso (Original Credito 13355 Noel Rd Ste 2100 Dallas, TX 75240		н	Collection Comcast-Savannah				544.00
Sheet no. 2 of 5 sheets attached to Schedule of				Sub	tota	1	10,658.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	e)	10,030.00

Case:12-42364-LWD Doc#:1 Filed:12/04/12 Entered:12/04/12 14:52:48 Page:23 of 52

 $B6F\ (Official\ Form\ 6F)\ (12/07)$ - Cont.

In re	Drevon M Jones,	Case No
_	Shalena C Jones	,

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

MALING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) No. XXXXXXXX1480 No. XXXXXXXX1480 No. XXXXXXXXX4480 No. XXXXXXXXX3547 No. XXXXXXXXX3547 No. XXXXXXXXX3547 No. XXXXXXXXXX3547 No. XXXXXXXXXX3547 No. XXXXXXXXXX3547 No. XXXXXXXXXXX3547 No. XXXXXXXXXXXX3547 No. XXXXXXXXXXXX3547 No. XXXXXXXXXXXX3547 No. XXXXXXXXXXXXX3547 No. XXXXXXXXXXXXX3547 No. XXXXXXXXXXXX3547 No. XXXXXXXXXXXX3547 No. XXXXXXXXXXX3547 No. XXXXXXXXXXX3547 No. XXXXXXXXXXX3547 No. XXXXXXXXXXX3547 No. XXXXXXXXXXXX3547 No. XXXXXXXXXXXX3547 No. XXXXXXXXXXXX3547 No. XXXXXXXXXXXX3547 No. XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX					-		-	T
Educaidwac 384 Galleria Pkwy Madison, MS 39110 Account No. xxxxxxxxx3547 Gerb/Care Credit Po Box 981439 El Paso, TX 79998 ChargeAccount Opened 3/31/05 Last Active 11/05/12 ChargeAccount W Dened 12/01/97 Last Active 6/23/03 ChargeAccount Opened 12/01/97 Last Active 6/23/03 ChargeAccount W Opened 12/01/97 Last Active 1/01/03 InstallmentSalesContract Opened 9/01/97 Last Active 1/01/03 InstallmentSalesContract Opened 10/30/03 Last Active 12/05/05 CreditCard	MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER	ΙŤΙ	H W	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	CONTINGEN	UNLIQUIDA	ISPUTE	AMOUNT OF CLAIM
Educaidwac 384 Galleria Pkwy Madison, MS 39110 Account No. xxxxxxxxx3547 Gerb/Care Credit Po Box 981439 El Paso, TX 79998 ChargeAccount Opened 3/31/05 Last Active 11/05/12 ChargeAccount W Dened 12/01/97 Last Active 6/23/03 ChargeAccount Opened 12/01/97 Last Active 6/23/03 ChargeAccount W Opened 12/01/97 Last Active 1/01/03 InstallmentSalesContract Opened 9/01/97 Last Active 1/01/03 InstallmentSalesContract Opened 10/30/03 Last Active 12/05/05 CreditCard	Account No. xxxxxxx1480				T	E		
ChargeAccount	384 Galleria Pkwy			InstallmentSalesContract		D		Unknown
W W	Account No. xxxxxxxx3547	t		Opened 3/31/05 Last Active 11/05/12	t			
Account No. xxxxxxxxx6703 Gecrb/Jcp Po Box 965005 Orlando, FL 32896 Account No. xxxxxxxx1401 Gsfaservic 2082 E Exchange Place Ste 200 Tucker, GA 30084-5334 Opened 12/01/97 Last Active 6/23/03 Opened 9/01/97 Last Active 1/01/03 InstallmentSalesContract W Opened 9/01/97 Last Active 1/01/03 InstallmentSalesContract W Opened 10/30/03 Last Active 12/05/05 CreditCard W Opened 10/30/03 Last Active 12/05/05 CreditCard	Po Box 981439		W	-				
ChargeAccount W ChargeAccount								1,372.00
Gsfaservic 2082 E Exchange Place Ste 200 Tucker, GA 30084-5334 Account No. xxxxxxxxx0923 Hsbc Bank Po Box 5253 Carol Stream, IL 60197 InstallmentSalesContract W Opened 10/30/03 Last Active 12/05/05 CreditCard W Opened 10/30/03 Last Active 12/05/05	Gecrb/Jcp Po Box 965005		w					0.00
Account No. xxxxxxxx0923 Hsbc Bank Po Box 5253 Carol Stream, IL 60197 Opened 10/30/03 Last Active 12/05/05 CreditCard W	Gsfaservic 2082 E Exchange Place Ste 200							
Hsbc Bank Po Box 5253 Carol Stream, IL 60197								0.00
	Hsbc Bank Po Box 5253		w					0.00
Sheet no. 3 of 5 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims Subtotal (Total of this page)								1,372.00

Case:12-42364-LWD Doc#:1 Filed:12/04/12 Entered:12/04/12 14:52:48 Page:24 of 52

B6F (Official Form 6F) (12/07) - Cont.

In re	Drevon M Jones,	Case No.
	Shalena C Jones	

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CDEDITODIC NAME	С	Н	sband, Wife, Joint, or Community		CO	U N	D I	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C H H	CONSIDERATION FOR CLAIM. IF CLAIM		N T I	NLIQUIDATED	S P U	AMOUNT OF CLAIM
Account No. xxxxxx0690			Opened 10/12/06 Last Active 12/19/08		Ť	Ť E		
Kay Jewelers 375 Ghent Rd Fairlawn, OH 44333		н	ChargeAccount			D		0.00
Account No. xxxxxxxxxxxx8395	╁	+	Opened 6/29/12 Last Active 7/01/12	-	+			
Online Collections (Po Box 1489 Winterville, NC 28590		W	Collection City Of Fairburn					256.00
Account No. xxxxxx0604	╀	-	Opened 6/01/04 Last Active 6/01/04	_	4			256.00
Rky Mtn 2244 Trawood El Paso, TX 79935		н	RealEstateSpecificTypeUnknown					Unknown
Account No. xxxxxxxx1050	╅		Opened 7/01/96 Last Active 12/31/06	1	1			
Sears/Cbna Po Box 6282 Sioux Falls, SD 57117		н	CreditCard					0.00
Account No. xxxxxxxxxx0003	+	+	Opened 8/17/98 Last Active 2/01/03		+			0.00
SIsc Educaid 1200 N 7th St Harrisburg, PA 17102		W	Educational					0.00
Sheet no4 of _5 sheets attached to Schedule of		_	<u> </u>	Su	bto	ota	<u>L</u> l	
Creditors Holding Unsecured Nonpriority Claims			(Total					256.00

 $B6F\ (Official\ Form\ 6F)\ (12/07)$ - Cont.

In re	Drevon M Jones,	Case No.
	Shalena C Jones	

Debtors SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME,	Ç	Hu	sband, Wife, Joint, or Community	ς	Ñ	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	ONTINGENT	UNLLQULDA	S P U T E D	AMOUNT OF CLAIM
Account No. Multiple accounts	ı		Educational		=		
Us Dept Of Education Po Box 5609 Greenville, TX 75403		н			D		20,427.00
Account No. xxxxxxxxxxx3497	1	T	Opened 9/15/04 Last Active 11/01/12	T	T	T	
Usaa Sb Po Box 33009 San Antonio, TX 78265		н	CreditCard				
	ı						11,058.00
Account No. xxxxxxxxxxxxx0001 Wells Fargo Bank Texas Po Box 94435 Albuquerque, NM 87199		н	Opened 9/17/99 Last Active 9/01/04 Automobile				
							0.00
Account Noxxxxxx7141	╁		Opened 1/29/03 Last Active 10/14/12	t		\perp	
l			Educational				
Wf Efs	ı	w					
501 Bleecker St Utica, NY 13501-2498		"					
0.100, 141 15501 2450							
							76,478.00
Account No.							
Sheet no. 5 of 5 sheets attached to Schedule of	_			Sub	tota	ıl	
Creditors Holding Unsecured Nonpriority Claims			(Total of t				107,963.00
The state of the s			(1000)		Γota		
			(Report on Summary of So				125,349.00
			(report on Summary of St			/	i

Case:12-42364-LWD Doc#:1 Filed:12/04/12 Entered:12/04/12 14:52:48 Page:26 of 52

B6G (Official Form 6G) (12/07)

In re	Drevon M Jones,		Case No.	
	Shalena C Jones			
-		Debtors	,	

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case:12-42364-LWD Doc#:1 Filed:12/04/12 Entered:12/04/12 14:52:48 Page:27 of 52

B6H (Official Form 6H) (12/07)

In re	Drevon M Jones,	Case No.
	Shalena C Jones	

Debtors

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

B6I (Offi	icial Form 61) (12/07)			
In re	Drevon M Jones Shalena C Jones		Case No.	
		Debtor(s)		•

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status:	DEPENDENTS (OF DEBTOR AND	SPOUSE		
	RELATIONSHIP(S):	AGE(S)):		
Married	Son	3			
	Daughter	4			
Employment:	DEBTOR		SPOUSE		
	Major/Reserved	Prosecutor			
1 7	DFAS-HGA/CL		unty DA Office		
	13 years	2 years			
	Garnishment Operations PO Box 998002 Cleveland, OH 44199-8002				
	projected monthly income at time case filed)		DEBTOR		SPOUSE
	commissions (Prorate if not paid monthly)	\$	898.44	\$	5,166.38
2. Estimate monthly overtime		\$	0.00	\$	0.00
3. SUBTOTAL		\$	898.44	\$	5,166.38
4. LESS PAYROLL DEDUCTION	S				
a. Payroll taxes and social secu	urity	\$	256.29	\$	1,106.80
b. Insurance		\$	27.00	\$	0.00
c. Union dues		\$	0.00	\$	0.00
d. Other (Specify): Pen	sion	\$	0.00	\$	180.82
		\$	0.00	\$	0.00
5. SUBTOTAL OF PAYROLL DE	DUCTIONS	\$	283.29	\$_	1,287.62
6. TOTAL NET MONTHLY TAKE	E HOME PAY	\$	615.15	\$	3,878.76
7. Regular income from operation o	f business or profession or farm (Attach detailed state	ement) \$	0.00	\$	0.00
8. Income from real property		\$	0.00	\$	0.00
9. Interest and dividends		\$	0.00	\$	0.00
dependents listed above	rt payments payable to the debtor for the debtor's use	or that of \$	0.00	\$_	0.00
11. Social security or government as	ssistance	Φ.	0.00	Φ	0.00
(Specify):		\$	0.00	<u></u> 5 –	0.00
10 P		\$	0.00	ф —	0.00
12. Pension or retirement income		\$	0.00	۵	0.00
13. Other monthly income					
(Specify): Stipend		\$	1,200.00	<u></u> _	0.00
		\$	0.00	\$_	0.00
14. SUBTOTAL OF LINES 7 THR	OUGH 13	\$	1,200.00	\$_	0.00
15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)			1,815.15	\$	3,878.76
16. COMBINED AVERAGE MON	15)	\$	5,693	3.91	

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

B6J (Offici	ial F	orm (6 J)	(12/07))
	Dre	von	М	Jones	s

In re	Shalena C Jones		Case No.	
		Debtor(s)		

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Comple expenditures labeled "Spouse."	ete a separato	e schedule of
1. Rent or home mortgage payment (include lot rented for mobile home)	\$	1,000.00
a. Are real estate taxes included? Yes No _X		
b. Is property insurance included? Yes No X		
2. Utilities: a. Electricity and heating fuel	\$	350.00
b. Water and sewer	\$	65.00
c. Telephone	\$	0.00
d. Other See Detailed Expense Attachment	\$	220.00
3. Home maintenance (repairs and upkeep)	\$	0.00
4. Food	\$	800.00
5. Clothing	\$	50.00
6. Laundry and dry cleaning	\$	50.00
7. Medical and dental expenses	\$	50.00
8. Transportation (not including car payments)	\$	430.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	0.00
10. Charitable contributions	\$	500.00
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	0.00
b. Life	\$	0.00
c. Health	\$	0.00
d. Auto	\$	200.00
e. Other	\$	0.00
12. Taxes (not deducted from wages or included in home mortgage payments)		
(Specify)	\$	0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)	·	
a. Auto	\$	720.00
b. Other Storage Unit	\$	112.00
c. Other	\$	0.00
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
17. Other See Detailed Expense Attachment	\$	1,125.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	5,672.00
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:	_	
20. STATEMENT OF MONTHLY NET INCOME	Φ.	E 005 04
a. Average monthly income from Line 15 of Schedule I	\$	5,693.91
b. Average monthly expenses from Line 18 above	\$	5,672.00
c. Monthly net income (a. minus b.)	\$	21.91

B6J (Official Form 6J) (12/07)
Drevon M Jones

In re Shalena C Jones Case No.

Debtor(s)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S) Detailed Expense Attachment

Other Utility Expenditures:

cell phone	\$ 180.00
Pest Control	\$ 40.00
Total Other Utility Expenditures	\$ 220.00

Other Expenditures:

Childcare (\$360 bi-weekly)	\$	700.00
Personal Hygiene	<u> </u>	75.00
Household Cleaning Supplies and Products	<u> </u>	100.00
Vehicle Maintenance	<u> </u>	60.00
Vehicle Maintenance	<u> </u>	60.00
Vehicle Maintenance	<u> </u>	30.00
Haircare	\$	100.00
Total Other Expenditures	\$	1,125.00

 $Case: 12-42364-LWD \quad Doc\#: 1 \quad Filed: 12/04/12 \quad Entered: 12/04/12 \quad 14:52:48 \quad Page: 31 \ of \ 52 \\ B6 \ Declaration (Official Form 6 - Declaration). \ (12/07)$

United States Bankruptcy Court Southern District of Georgia

In re	Drevon M Jones Shalena C Jones			Case No.	
			Debtor(s)	Chapter	7
	DECLARATION C	ONCERN	ING DEBTOR'S SO	CHEDULI	ES
	DECLARATION UNDER I	PENALTY (OF PERJURY BY INDIVI	DUAL DEF	BTOR
	I declare under penalty of perjury the sheets, and that they are true and correct to the				es, consisting of21
Date	December 4, 2012	Signature	/s/ Drevon M Jones Drevon M Jones Debtor		
Date	December 4, 2012	Signature	/s/ Shalena C Jones Shalena C Jones		

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Joint Debtor

B7 (Official Form 7) (12/12)

United States Bankruptcy Court Southern District of Georgia

In re	Drevon M Jones Shalena C Jones	Case No.		
		Debtor(s)	Chapter	7

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$120,349.70 2012 YTD: Both Employment Income

\$134,000.00 2011: Both Estimate \$134,000.00 2010: Both Estimate

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF PAYMENTS/ TRANSFERS AMOUNT PAID OR VALUE OF TRANSFERS

AMOUNT STILL OWING

NAME AND ADDRESS OF CREDITOR

None

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION STATUS OR DISPOSITION

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE

BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND

VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b.

b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

I.AW

LAW

GOVERNMENTAL UNIT

NOTICE

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF **GOVERNMENTAL UNIT**

DATE OF

ENVIRONMENTAL

NOTICE

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF **GOVERNMENTAL UNIT**

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS

BEGINNING AND ENDING DATES

NAME None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME ADDRESS B 7 (12/12)

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

21 . Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

B 7 (12/12)

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

ADDRESS

DATE OF WITHDRAWAL

None

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT,

RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

* * * * * *

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date December 4, 2012 Signature /s/ Drevon M Jones

Drevon M Jones

Debtor

Date December 4, 2012 Signature /s/ Shalena C Jones

Shalena C Jones

Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

Case:12-42364-LWD Doc#:1 Filed:12/04/12 Entered:12/04/12 14:52:48 Page:39 of 52

United States Bankruptcy Court Southern District of Georgia

In	re Shalena C Jones		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	NSATION OF ATTO	RNEY FOR DE	CBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 20 compensation paid to me within one year before the filin be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy	, or agreed to be paid	to me, for services rendered or	to
				1,199.00	
	Prior to the filing of this statement I have received		\$	1,199.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed comp	ensation with any other person	unless they are memb	pers and associates of my law fi	rm.
	☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the name				L
5.	In return for the above-disclosed fee, I have agreed to re	nder legal service for all aspec	ts of the bankruptcy c	ase, including:	
	 a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of credited d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on ho 	ement of affairs and plan which ors and confirmation hearing, a reduce to market value; ex ons as needed; preparation	n may be required; nd any adjourned hea emption planning;	rings thereof;	
6.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding.			es, relief from stay actions	or
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any s bankruptcy proceeding.	y agreement or arrangement for	payment to me for re	presentation of the debtor(s) in	
Da	tted: December 4, 2012	/s/ John E. Pytte			
		John E. Pytte 590 John Pytte P.O. BOX 949 Hinesville, GA 31 912-369-3569	310		
		johnpytte@jpytte			

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF GEORGIA

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$46 administrative fee, \$15 trustee surcharge: Total Fee \$306)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$46 administrative fee: Total fee \$281)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

Form B 201A, Notice to Consumer Debtor(s)

Page 2

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$46 administrative fee: Total fee \$1,213)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$46 administrative fee: Total fee \$246)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Case:12-42364-LWD Doc#:1 Filed:12/04/12 Entered:12/04/12 14:52:48 Page:42 of 52

B 201B (Form 201B) (12/09)

United States Bankruptcy Court Southern District of Georgia

In re	Drevon M Jones Shalena C Jones		Case No.		
	1	Debt	or(s) Chapter	7	
	CERTIFICATION OF NOTICE UNDER § 342(b) OF TH			R(S)	
	Certification	n (of Debtor		
	I (We), the debtor(s), affirm that I (we) have received and	rea	d the attached notice, as required	by § 342	2(b) of the Bankruptcy
Code.					
	n M Jones a C Jones	X	/s/ Drevon M Jones		December 4, 2012
Printed	Name(s) of Debtor(s)		Signature of Debtor		Date
Case N	o. (if known)	X	/s/ Shalena C Jones		December 4, 2012
			Signature of Joint Debtor (if any)	Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

United States Bankruptcy Court Southern District of Georgia

In re	Drevon M Jones Shalena C Jones		Case No.	
		Debtor(s)	Chapter	7

CERTIFICATION OF CREDITOR MAILING MATRIX

The purpose of the Certification of Creditor Mailing Matrix form is to certify that the creditor information provided on the diskette (or by ECF submission) matches **exactly** the creditor information provided on the schedules. Accordingly, I hereby certify under penalty of perjury that the master mailing list of creditors submitted on computer diskette or electronically via the CM/ECF system is a true, correct and complete listing to the best of my knowledge and that the names and number of creditors provided on the diskette/ECF submission corresponds exactly to the creditor information listed on the schedules.

I further acknowledge that (1) the accuracy and completeness in preparing the creditor listing are the shared responsibility of the debtor and the debtor's attorney; (2) the court will rely on the creditor listing for all mailings; (3) the various schedules and statements required by the Bankruptcy Rules are not used for mailing purposes; and (4) that debtor, attorney and trustee information is not included on the diskette or electronic submission.

The master mailing list of creditors is submitted via: computer diskette listing a total of creditors which corresponds exactly to the schedules: or electronic means (ECF) listing a total of creditors which corresponds exactly to the schedules. /s/ Drevon M Jones **Drevon M Jones** Debtor /s/ Shalena C Jones Shalena C Jones Joint Debtor /s/ John E. Pytte John E. Pytte 590555 Attorney for Debtor(s) Date: December 4, 2012

Revised: 10/05 EXHIBIT 1

AES/PHEAA 1200 NORTH 7TH STREET HARRISBURG PA 17102 CARMAX AUTO FINANCE 2040 THALBRO ST RICHMOND VA 23230 GSFASERVIC 2082 E EXCHANGE PLACE STE 2 TUCKER GA 30084-5334

AES/WACHOVIA EDUCATION PO BOX 2461 HARRISBURG PA 17105 CB/EXPRESS PO BOX 330066 NORTHGLENN CO 80233-8066

HSBC BANK PO BOX 5253 CAROL STREAM IL 60197

AFFILIATED PO BOX 790001 SUNRISE BEACH MO 65079 CHARTER BANK 2130 EUBANK BLVD NE ALBUQUERQUE NM 87112 KAY JEWELERS 375 GHENT RD FAIRLAWN OH 44333

ALLY FINANCIAL 200 RENAISSANCE CTR DETROIT MI 48243 CITI PO BOX 6241 SIOUX FALLS SD 57117 MIDLAND MTG/MIDFIRST 999 NW GRAND BLVD OKLAHOMA CITY OK 73118

BANK OF TEXAS NA 5956 SHERRY LN DALLAS TX 75225

CITIMORTGAGE INC PO BOX 9438 GAITHERSBURG MD 20898 ONLINE COLLECTIONS (PO BOX 1489 WINTERVILLE NC 28590

BENFCL/HFC PO BOX 3425 BUFFALO NY 14240 CREDIT PROTECTION ASSO (ORIGINALR**KREDIINO**13355 NOEL RD STE 2100 2244 TRAWOOD
DALLAS TX 75240 EL PASO TX 79935

BK OF AMER DE5-019-03-07 NEWARK DE 19714 EDUCAIDWAC 384 GALLERIA PKWY MADISON MS 39110 SEARS/CBNA PO BOX 6282 SIOUX FALLS SD 57117

CADENCE BANK NA 301 E MAIN ST STARKVILLE MS 39759 GECRB/CARE CREDIT PO BOX 981439 EL PASO TX 79998 SLSC EDUCAID 1200 N 7TH ST HARRISBURG PA 17102

CAP ONE PO BOX 5253 CAROL STREAM IL 60197 GECRB/JCP PO BOX 965005 ORLANDO FL 32896 US DEPT OF EDUCATION PO BOX 5609 GREENVILLE TX 75403 USAA SB PO BOX 33009 SAN ANTONIO TX 78265

WELLS FARGO BANK TEXAS PO BOX 94435 ALBUQUERQUE NM 87199

WF EFS 501 BLEECKER ST UTICA NY 13501-2498

Case:12-42364-LWD Doc#:1 Filed:12/04/12 Entered:12/04/12 14:52:48 Page:46 of 52 B22A (Official Form 22A) (Chapter 7) (12/10)

In re	Drevon M Jones Shalena C Jones	According to the information required to be entered on this statement
	Debtor(s)	(check one box as directed in Part I, III, or VI of this statement):
Case Number: (If known)		☐ The presumption arises.
	(II Kilowii)	■ The presumption does not arise.
		☐ The presumption is temporarily inapplicable.

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by § 707(b)(2)(C).

	Part I. MILITARY AND NON-CONSUMER DEBTORS
1A	Disabled Veterans. If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
171	□ Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).
1B	Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	☐ Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.
	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.
1C	Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard
	a. I was called to active duty after September 11, 2001, for a period of at least 90 days and I remain on active duty /or/ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;
	OR
	 b. □ I am performing homeland defense activity for a period of at least 90 days /or/ □ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.

	Part II. CALCULATION OF M	ION	NTHLY INCO)N	IE FOR § 707(b)(7) F	EXCLUSION		
	Marital/filing status. Check the box that applies a	ınd c	complete the bala	nce	of this part of this state	mei	nt as directed.		
	a. \square Unmarried. Complete only Column A ("D								
	b. \square Married, not filing jointly, with declaration								
2	"My spouse and I are legally separated under								
2	purpose of evading the requirements of § 707 for Lines 3-11.	(b)(2	2)(A) of the Bank	rup	itcy Code." Complete o	nly	column A ("Del	otoi	's Income")
	c. ☐ Married, not filing jointly, without the declar	arati	on of separate ho	100	holds set out in Line 2 l	, ah	ove Complete h	۸th	Column A
	("Debtor's Income") and Column B ("Spot					ao	ove. complete b	Oth	Column 71
	d. Married, filing jointly. Complete both Colo					Spo	ouse's Income'')	for	Lines 3-11.
	All figures must reflect average monthly income re						Column A		Column B
	calendar months prior to filing the bankruptcy case								
	the filing. If the amount of monthly income varied			ıs, <u>y</u>	ou must divide the		Debtor's Income		Spouse's Income
	six-month total by six, and enter the result on the a	ippro	opriate line.				Theome		Income
3	Gross wages, salary, tips, bonuses, overtime, con	nmi	ssions.			\$	898.44	\$	5,166.38
	Income from the operation of a business, profess								
	enter the difference in the appropriate column(s) o								
	business, profession or farm, enter aggregate number not enter a number less than zero. Do not include								
4	Line b as a deduction in Part V.	unj	part of the basi		s expenses effected on				
			Debtor		Spouse				
	a. Gross receipts	\$	0.0						
	b. Ordinary and necessary business expenses	\$	0.00			١.			
	c. Business income	•	btract Line b from			\$	0.00	\$	0.00
	Rents and other real property income. Subtract								
	the appropriate column(s) of Line 5. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part V.								
5	Debtor Spouse								
	a. Gross receipts	\$	0.0	0					
	b. Ordinary and necessary operating expenses	\$	0.0	0	\$ 0.00				
	c. Rent and other real property income	Su	btract Line b fron	n L	ine a	\$	0.00	\$	0.00
6	Interest, dividends, and royalties.					\$	0.00	\$	0.00
7	Pension and retirement income.					\$	0.00	\$	0.00
	Any amounts paid by another person or entity,	on a	regular basis, fo	r t	he household				
	expenses of the debtor or the debtor's dependen								
8	purpose. Do not include alimony or separate main								
	spouse if Column B is completed. Each regular pa					\$	0.00	2	0.00
	if a payment is listed in Column A, do not report the Unemployment compensation. Enter the amount					Ψ	0.00	Ψ	0.00
	However, if you contend that unemployment comp								
0	benefit under the Social Security Act, do not list the								
9	or B, but instead state the amount in the space below	w:							
	Unemployment compensation claimed to	_							
	be a benefit under the Social Security Act Debto	r \$	0.00 S	po	use \$ 0.00	\$	0.00	\$	0.00
	Income from all other sources. Specify source an								
	on a separate page. Do not include alimony or sep								
	spouse if Column B is completed, but include all maintenance. Do not include any benefits received								
	received as a victim of a war crime, crime against l								
10	domestic terrorism.		3 /						
			Debtor		Spouse				
	a. Stipend	\$	1,200.0						
	b.	\$			\$				
	Total and enter on Line 10					\$	1,200.00	\$	0.00
11	Subtotal of Current Monthly Income for § 707 (1) Column B is completed, add Lines 3 through 10 in					\$	2,098.44	\$	5,166.38
	Column D is completed, and Lines 5 unrough 10 if	ı (CO).	umm D. Emer in	υll	nans).	Ψ	£,000.74	Ψ	5,100.30

B22A (Official Form 22A) (Chapter 7) (12/10)

12	Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.		7,264.82
	Part III. APPLICATION OF § 707(b)(7) EXCLUSION		
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result.	\$	87,177.84
14	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)		
	a. Enter debtor's state of residence: GA b. Enter debtor's household size: 4	\$	65,851.00
15	 Application of Section 707(b)(7). Check the applicable box and proceed as directed. ☐ The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII. ■ The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement. 	does no	ot arise" at the

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

	Part IV. CALCULATION O	F CURREN	T MONTHLY INCOM	ME FOR § 707(b)(2	2)	
16	Enter the amount from Line 12.				\$	7,264.82
17	Marital adjustment. If you checked the box at Column B that was NOT paid on a regular basis dependents. Specify in the lines below the basis spouse's tax liability or the spouse's support of amount of income devoted to each purpose. If not check box at Line 2.c, enter zero.	s for the housels for excluding persons other th	nold expenses of the debtor of the Column B income (such a nan the debtor or the debtor's	the debtor's as payment of the dependents) and the		
	a. b. c. d.		\$ \$ \$ \$		\$	0.00
	Total and enter on Line 17					
18	Current monthly income for § 707(b)(2). Su	otract Line 17 fi	rom Line 16 and enter the res	uit.	\$	7,264.82
	Part V. CALCULA	TION OF I	DEDUCTIONS FROM	INCOME		
	Subpart A: Deductions u	nder Standar	ds of the Internal Reven	ie Service (IRS)		
19A	Standards for Food, Clothing and Other Items at www.usdoj.gov/ust/ or from the clerk of the that would currently be allowed as exemptions additional dependents whom you support.	bankruptcy cou on your federal	rt.) The applicable number o income tax return, plus the n	f persons is the number umber of any	\$	1,450.00
19B	National Standards: health care. Enter in Lin Out-of-Pocket Health Care for persons under 6 Out-of-Pocket Health Care for persons 65 year www.usdoj.gov/ust/ or from the clerk of the ba who are under 65 years of age, and enter in Lin older. (The applicable number of persons in each be allowed as exemptions on your federal incomyou support.) Multiply Line a1 by Line b1 to o Line c1. Multiply Line a2 by Line b2 to obtain c2. Add Lines c1 and c2 to obtain a total health	5 years of age, as of age or older nkruptcy court. ne b2 the applic ch age category ne tax return, p btain a total am a total amount:	and in Line a2 the IRS Nation r. (This information is available Enter in Line b1 the applicate able number of persons who is the number in that categoralus the number of any addition ount for persons under 65, and for persons 65 and older, and nd enter the result in Line 19	al Standards for le at ble number of persons are 65 years of age or y that would currently nal dependents whom d enter the result in enter the result in Line B.		
	Persons under 65 years of age		Persons 65 years of age			
	a1. Allowance per person b1. Number of persons	60 a2. 4 b2.	Allowance per person Number of persons	144		
	c1. Subtotal				\$	240.00
Local Sta Utilities S available the numb	•	240.00 c2. nortgage experiments applicable or of the bankro	Subtotal ses. Enter the amount of the county and family size. (This uptcy court). The applicable f	IRS Housing and information is amily size consists of	\$	240.00 585.00

	s of r of	ter, in Line a below, the amount of the cy and family size (this information is part) (the applicable family size consideral income tax return, plus the number of the Average Monthly Payments	ounty y cou fede	nortgage/rent expense for your cour r from the clerk of the bankruptcy of e allowed as exemptions on your fe	Housing available the num	
		Line a and enter the result in Line 20		ated in Line 42; subtract Line b from		20B
	57.00	\$ 1,	se	Standards; mortgage/rental expense for any debts secured by your		
4 007 00	0.00	Subtract Line b form Line a		ine 42	1 *	
1,267.00	\$	Subtract Line b from Line a.		se		
0.04	•	that the process set out in Lines 20A led under the IRS Housing and Utilit entitled, and state the basis for your	ntitle	the allowance to which you are enti-	20B do	21
0.00	\$					
		whether you pay the expenses of ope	s of v	you use public transportation.	You are vehicle	
	are	es or for which the operating expense	enses	household expenses in Line 8.	include	22A
		Operating Costs" amount from IRS I	ne "C		Transpo	
688.00		applicable Metropolitan Statistical Ar from the clerk of the bankruptcy co				
	on for	expense. If you pay the operating expourance entitled to an additional deductorsportation amount from IRS Local v/ust/ or from the clerk of the bankru	at yo Trans	ransportation, and you contend that s, enter on Line 22B the "Public Tr	for a ve	22B
0.00	\$		<u> </u>		court.)	
	nich	1. Check the number of vehicles for hip/lease expense for more than two				
					= 1	
		IRS Local Standards: Transportation ourt); enter in Line b the total of the e 42; subtract Line b from Line a and	у со	or from the clerk of the bankruptcy	(availab Monthl	23
	7.00	\$	_	rds, Ownership Costs	a. 1	
	6.00	\$		for any debts secured by Vehicle	b. 1	
0.00	\$	Subtract Line b from Line a.		se for Vehicle 1	1	
	ked	2. Complete this Line only if you ch IRS Local Standards: Transportation		• •	the "2 o	
	nter	ourt); enter in Line b the total of the e 42; subtract Line b from Line a and	cy co Line	or from the clerk of the bankruptcy ecured by Vehicle 2, as stated in Lier an amount less than zero.	(availab Monthly the resu	24
	0.00	\$		rds, Ownership Costs for any debts secured by Vehicle	11	
	0.00	\$	\$	<u> </u>	b. /	
0.00	\$	Subtract Line b from Line a.		se for Vehicle 2		
		pense that you actually incur for all forme taxes, self employment taxes, so				25
1,390.09	\$. Do not include real estate or sale	State an	

Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance. 28 Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44. Other Necessary Expenses: calcuation for employment or for a physically or mentally challenged child. Enter decide all average monthly amount that you actually expend on providing similar services is available. Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare - such as boby-stiting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare - such as boby-stiting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: the enter of the state of the payments of the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or bealth savings accounts with a pour basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 19-32 Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your sp						
Iffe insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.	26	deductions that are required for your employment, such as a	retirement contributions, union dues, and uniform costs.	\$	190.00	
Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44. 20 Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the color allower of the providing similar services is available. 30 Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as buby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as buby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health acre that its required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings account. Sited in Line 44. Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually expend on health savings account and that is in excess of the amount entered in Line 19B. Do not include any expenses childcare. Site in the control of the payments for health insurance or health savings account and that is in excess of the amount entered in Line 19B. Do not include any expenses that you have listed in Lines 19-32. Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 19-32. Feath Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines are below that are reasonably necess	27	life insurance for yourself. Do not include premiums for i		\$	27.00	
the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. 30 Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare - such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. 5 700.0 Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings accounts listed in Line 34. Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call wating, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Suppart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 19-32 Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for your spouse, or your dependents. 134 Health Insurance, Disability Insurance, and Health Savings Account Expenses. List th	28	Other Necessary Expenses: court-ordered payments. En pay pursuant to the order of a court or administrative agence	cy, such as spousal or child support payments. Do not		0.00	
Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare - such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account. Satetisted in Line 34. Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service- such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 19-32 Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines ac- below that are reasonably necessary for yourself, your spouse, or your dependents. A	29	the total average monthly amount that you actually expend education that is required for a physically or mentally challe	for education that is a condition of employment and for	\$	0.00	
health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by include payments for health insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34. 32 Other Necesary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 19-32 Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents. a. Health Insurance	30	Other Necessary Expenses: childcare. Enter the total ave childcare - such as baby-sitting, day care, nursery and presc	erage monthly amount that you actually expend on chool. Do not include other educational payments.		700.00	
actually pay for ielecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 19-32 Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents. a. Health Insurance	31	health care that is required for the health and welfare of you insurance or paid by a health savings account, and that is in	urself or your dependents, that is not reimbursed by a excess of the amount entered in Line 19B. Do not	\$	0.00	
Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 19-32 Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents. A	32	actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and				
Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 19-32 Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents. a. Health Insurance \$ 0.00 b. Disability Insurance \$ 0.00 c. Health Savings Account \$ 0.00 Total and enter on Line 34. If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: \$	33	Total Expenses Allowed under IRS Standards. Enter the	e total of Lines 19 through 32.	\$	6.587.09	
a. Health Insurance \$ 0.00 b. Disability Insurance \$ 0.00 c. Health Savings Account \$ 0.00 Total and enter on Line 34. If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: \$	24	the categories set out in lines a-c below that are reasonably				
Total and enter on Line 34. If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: \$	34	a. Health Insurance	\$ 0.00			
Total and enter on Line 34. If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: \$ Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. \$ O.0 Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92* per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and						
If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92° per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and		b. Disability Insurance	\$ 0.00			
expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. Seducation expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92* per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and				\$	0.00	
actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92* per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and		c. Health Savings Account Total and enter on Line 34. If you do not actually expend this total amount, state you below:	\$ 0.00	\$	0.00	
Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92* per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and	35	c. Health Savings Account Total and enter on Line 34. If you do not actually expend this total amount, state you below: \$ Continued contributions to the care of household or fam expenses that you will continue to pay for the reasonable ar ill, or disabled member of your household or member of yo	\$ 0.00 It actual total average monthly expenditures in the space It will be made to the space actual monthly and necessary care and support of an elderly, chronically		0.00	
Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92* per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and		c. Health Savings Account Total and enter on Line 34. If you do not actually expend this total amount, state you below: \$ Continued contributions to the care of household or fame expenses that you will continue to pay for the reasonable ar ill, or disabled member of your household or member of yo expenses. Protection against family violence. Enter the total average actually incurred to maintain the safety of your family under the your family under the safety of your family under the your family under	\$ 0.00 are actual total average monthly expenditures in the space will members. Enter the total average actual monthly and necessary care and support of an elderly, chronically our immediate family who is unable to pay for such the reasonably necessary monthly expenses that you er the Family Violence Prevention and Services Act or	\$		
incressary and not an early accounted for in the fixe standards.	36	c. Health Savings Account Total and enter on Line 34. If you do not actually expend this total amount, state you below: \$ Continued contributions to the care of household or fame expenses that you will continue to pay for the reasonable ar ill, or disabled member of your household or member of yo expenses. Protection against family violence. Enter the total average actually incurred to maintain the safety of your family under other applicable federal law. The nature of these expenses in the energy costs. Enter the total average monthly amoung Standards for Housing and Utilities, that you actually expertrustee with documentation of your actual expenses, and	sur actual total average monthly expenditures in the space while members. Enter the total average actual monthly and necessary care and support of an elderly, chronically our immediate family who is unable to pay for such the reasonably necessary monthly expenses that you are the Family Violence Prevention and Services Act or is required to be kept confidential by the court. The entry in excess of the allowance specified by IRS Local and for home energy costs. You must provide your case	\$	0.00	

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

39	expension Stand	nses exceed the combined allowardards, not to exceed 5% of those c	e. Enter the total average monthly an aces for food and clothing (apparel an ombined allowances. (This information). You must demonstrate that the	d ser	vices) in the IRS available at www	National v.usdoj.gov/ust/	\$	0.00
40			Enter the amount that you will conting ganization as defined in 26 U.S.C. §			e form of cash or	\$	500.00
41			s under § 707(b). Enter the total of I				\$	500.00
71	1014	<u>-</u>	ubpart C: Deductions for De				φ	300.00
42	own, and c amou bank	re payments on secured claims. list the name of the creditor, iden theck whether the payment includents scheduled as contractually due	For each of your debts that is secured tify the property securing the debt, ar es taxes or insurance. The Average Me to each Secured Creditor in the 60 ressary, list additional entries on a sep	by and state by the state by th	an interest in prop to the Average M ly Payment is the hs following the f	Ionthly Payment, total of all filing of the		
		Name of Creditor	Property Securing the Debt	A	Average Monthly Payment	Does payment include taxes or insurance?		
	a.	Ally Financial	2012 Jeep Grande Cherokee	\$	576.00	□yes ■no		
				-	Γotal: Add Lines		\$	576.00
43	moto your paym sums	r vehicle, or other property necess deduction 1/60th of any amount (tents listed in Line 42, in order to in default that must be paid in order	f any of debts listed in Line 42 are sectors are for your support or the support of the "cure amount") that you must pay maintain possession of the property. der to avoid repossession or foreclosudditional entries on a separate page. Property Securing the Debt	f you the The	ar dependents, you creditor in addition cure amount wou hist and total any a 1/60th of th	a may include in on to the ld include any such amounts in	¢.	0.00
44	prior		ims. Enter the total amount, divided be claims, for which you were liable at as those set out in Line 28.		, of all priority cl		\$	0.00
	Chap	oter 13 administrative expenses.	If you are eligible to file a case under the amount in line b, and enter the re					
45	a. b.	issued by the Executive Office	trict as determined under schedules for United States Trustees. (This w.usdoj.gov/ust/ or from the clerk of	x To	otal: Multiply Line	8.20 es a and b	\$	0.00
46	Tota	Deductions for Debt Payment.	Enter the total of Lines 42 through 4:	5.			\$	576.00
		Sı	ubpart D: Total Deductions f	ron	1 Income			
47	Tota	l of all deductions allowed under	r § 707(b)(2). Enter the total of Lines	33,	41, and 46.		\$	7,663.09
		Part VI. DE	TERMINATION OF § 707(I	b)(2) PRESUMP	ΓΙΟΝ		
48	Ente	r the amount from Line 18 (Cur	rent monthly income for § 707(b)(2))			\$	7,264.82
49	Ente	r the amount from Line 47 (Tota	al of all deductions allowed under §	707	(b)(2))		\$	7,663.09
50	Mon	thly disposable income under § 7	707(b)(2). Subtract Line 49 from Line	e 48	and enter the resu	ılt.	\$	-398.27
51	Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result. 60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the result.							-23,896.20

	Initial presumption determination. Check the applicable box	x and proceed as directed.					
52	■ The amount on Line 51 is less than \$7,025*. Check the bestatement, and complete the verification in Part VIII. Do not complete.		p of page 1 of this				
32	☐ The amount set forth on Line 51 is more than \$11,725* statement, and complete the verification in Part VIII. You may						
	☐ The amount on Line 51 is at least \$7,025*, but not more	than \$11,725*. Complete the remainder of Part	VI (Lines 53 through 55).				
53	Enter the amount of your total non-priority unsecured deb	ot .	\$				
54	Threshold debt payment amount. Multiply the amount in Li	ne 53 by the number 0.25 and enter the result.	\$				
	Secondary presumption determination. Check the applicable	e box and proceed as directed.	·				
55	☐ The amount on Line 51 is less than the amount on Line of this statement, and complete the verification in Part VIII.	54. Check the box for "The presumption does no	ot arise" at the top of page 1				
	☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.						
	Part VII. ADDITION	IAL EXPENSE CLAIMS					
56	Other Expenses. List and describe any monthly expenses, no you and your family and that you contend should be an additive 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a seach item. Total the expenses.	onal deduction from your current monthly incom	e under §				
	Expense Description	Monthly A	Amount				
	a.	\$					
	b	\$ \$					
	d.	\$					
	Total: Add Line	·					
		ERIFICATION					
	I declare under penalty of perjury that the information provide	ed in this statement is true and correct. (If this is	a joint case, both debtors				
	must sign.) Date: December 4, 2012	Signatura Id Dravan M. Janes					
	Date: December 4, 2012	Signature: /s/ Drevon M Jones Drevon M Jones					
57		(Debtor)					
	Date: December 4, 2012	Signature /s/ Shalena C Jones					
	·	Shalena C Jones					
		(Joint Debtor	r, if any)				

^{*} Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.